AMENDED IN ASSEMBLY MARCH 30, 2016

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 2588

Introduced by Assembly Member Chu

February 19, 2016

An act to amend Sections 103875 and 103885 of the Health and Safety Code, relating to cancer data. An act to amend Sections 1722, 1751.5, 14000, 14001, 14020, 14022, 14022.5, 14024, 14025, 14028, 14031, 14032, 14038, 14039, 14040, 14042, 14061, 14063, 14064, 14080, 14090.1, 14097, and 14099 of, to add Sections 14025.1 and 14079 to, to repeal Sections 14027, 14030, and 14037 of, and to repeal and add Sections 14010, 14021, 14026, 14029, and 14078 of, the Insurance Code, relating to insurance.

LEGISLATIVE COUNSEL'S DIGEST

AB 2588, as amended, Chu. Cancer data. Independent insurance adjusters.

Existing law, the Insurance Adjuster Act, sets forth various requirements with respect to operation as an insurance adjuster in this state, including, but not limited to, that the person be licensed, licensing qualifications and application requirements, codes of conduct, disciplinary actions, and nonresident and emergency licenses. The act defines the term, "insurance adjuster," to include a person, other than a private investigator, who, for any consideration whatsoever, engages in business or accepts employment to furnish, or agrees to make, or makes, any investigation for the purpose of obtaining, information in the course of adjusting or otherwise participating in the disposal of, any claim under or in connection with a policy of insurance on behalf of an insurer or engages in soliciting insurance adjustment business.

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Any person who knowingly falsifies the fingerprints or photographs submitted as part of the application process is guilty of a felony, and any person who violates any other provision governing insurance adjusters is guilty of a misdemeanor punishable by a fine not to exceed \$500, or by imprisonment in the county jail not to exceed one year, or by both that fine and imprisonment.

This bill would revise and recast the above provisions by, among other things, changing the name of the act to the Independent Insurance Adjuster Act and redefining an "independent insurance adjuster" to mean an individual, a business entity, an independent contractor, or an employee of a contractor, who contracts for compensation with insurers, a person whose tax treatment by the insurers is consistent with that of an independent contractor rather than as an employee, and a person who investigates, negotiates, or settles property and casualty claims for insurers. The bill would expand the categories of persons exempt from the act to include, among others, an individual who is employed to investigate suspected fraudulent insurance claims but who does not adjust losses or determine claims payments, and a person who solely performs executive, administrative, managerial, or clerical duties or any combination thereof and who does not investigate, negotiate, or settle claims with policyholders, claimants, or their legal representative. The bill would impose additional information and educational requirements on applicants and would impose additional code of conduct requirements on licensees. The bill would revise the provisions relating to nonresident and emergency licenses with regards to qualifying for those licenses. The bill would also create an apprentice independent insurance adjuster license to facilitate the experience, education, and training necessary to ensure reasonable competency in the responsibilities and duties of an independent insurance adjuster and would set forth the various terms and conditions of the license, including an application fee to be fixed by the Insurance Commissioner and reasonably related to the actual cost to the Department Of *Insurance in performing its duties. The bill would make an apprentice* independent insurance adjuster subject to a felony conviction if he or she knowingly falsifies the fingerprints or photograph submitted as part of his or her application for a license. The bill would also make conforming changes. Because the bill would create a new crime, it would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state.

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Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Existing law requires the State Public Health Officer to establish a statewide system for the collection of information determining the incidence of cancer, as specified. Existing law authorizes the State Department of Public Health to designate any demographic parts of the state as regional cancer incidence reporting areas and establish regional cancer registries to carry out the intent of existing law.

This bill would require the State Department of Public Health to analyze data collected pursuant to this program to assess, measure, and publicly report on the quality of cancer care in the state, as specified. The bill would require the development of a public reporting system on the quality of cancer care in the state. The bill also would require the department to develop a system for routine, automated linkages between data collected pursuant to the program and public and private health insurance payer cancer claims data, and would require the State Public Health Officer to convene a cancer care stakeholder committee to study and make recommendations for developing the automated linkage system.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no-yes.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 1722 of the Insurance Code is amended 2 to read:
- 3 1722. If a natural person while licensed pursuant to the
- 4 provisions of this chapter or Chapters Chapter 6 (commencing
- 5 with Section 1760), 7 (commencing with Section 1800), or 8
- 6 (commencing with Section 1831) of this part,—or Part 5 (commencing with Section 12140) of Division—2 2, or Chapter 1
- 8 (commencing with Section 14000) of Division 5 enters the military
- 9 service of the United States and is in-such that service at a time
- prescribed for the filing of a renewal application, the filing of such
- 11 that application is waived, and the license held by-such that
- 12 licensee at the time of his *or her* entry into military service shall
- 13 remain in force during the period of-such that military service and
- until the end of the license year in which he *or she* is released from

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1 such that service but not for less than six months after such that 2 release. During such period such that period, that person may 3 secure a license of the type held by him *or her* on his *or her* entry 4 into military service upon the filing of an application and paying 5 the fee therefor without the necessity of taking any examination 6 or paying any penalty.

- SEC. 2. Section 1751.5 of the Insurance Code is amended to read:
- 9 1751.5. The fees required by this chapter and by Chapter 6 (commencing with Section 1760), Chapter 7 (commencing with 10 Section 1800), and Chapter 8 (commencing with Section 1831) of 12 this part and by Chapter 1 (commencing with Section 14000) of Division 5 are filing fees, no portion of which shall be refunded 13 14 whether or not the application is acted upon or the examination is 15 taken.
- SEC. 3. Section 14000 of the Insurance Code is amended to 16 17 read:
 - 14000. This chapter may be cited as the *Independent* Insurance Adjuster Act.
- 20 SEC. 4. Section 14001 of the Insurance Code is amended to 21 read:
 - 14001. As used in this chapter: chapter, the following terms have the following meanings:
 - (a) "Catastrophe" means an event that results in a large number of deaths or injuries, causes extensive damage or destruction of facilities that provide and sustain human needs, produces an overwhelming demand on state and local response resources and mechanisms, causes a severe long-term effect on general economic activity, or severely affects state, local, and private sector capabilities to begin and sustain response activities.
- 31 (a)

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- 32 (b) "Commissioner" means the Insurance Commissioner.
- 33 (b)
- 34 (c) "Department" means the Department of Insurance.
- 35 (d) "Fingerprints" means an impression of the lines on the 36 finger taken for the purposes of identification.
- (e) "Home state" means the District of Columbia and any state 38 or territory of the United States in which an independent insurance 39 adjuster maintains his, her, or its principal place of residence or 40 business and is licensed to act as a resident independent insurance

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- adjuster. If the resident state does not license independent
- insurance adjusters, the independent insurance adjuster may
- designate California as his, her, or its home state, provided that
- 4 the independent insurance adjuster is licensed and in good 5 standing.
 - (f) "Individual" means a natural person.
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- (g) "Licensee" means a person licensed under this chapter.
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- 10 (h) "Manager" means the individual under whose direction, 11 control, charge, or management the business of a licensee is 12 operated.
 - (i) "Nonresident" means a person who is not a resident of California at the time of the performance of the act referred to in Section 14071.
 - (e)
 - (j) "Person" includes any individual, firm, company, association, organization, partnership, limited liability company, and corporation.
 - SEC. 5. Section 14010 of the Insurance Code is repealed.
 - 14010. The department succeeds to and is vested with all the duties, powers, purposes, responsibilities, and jurisdiction previously vested in the Bureau of Collection and Investigative Services with respect to the licensing of insurance adjusters.
 - Any reference to prior licensing shall be deemed to licensing under the Private Investigator and Adjuster Act.
 - The commissioner shall administer and enforce the provisions of this chapter.
- 29 SEC. 6. Section 14010 is added to the Insurance Code, to read:
- 30 14010. The commissioner shall administer and enforce the provisions of this chapter.
- 32 SEC. 7. Section 14020 of the Insurance Code is amended to 33 read:
- 34 14020. No
- 35 (a) A person shall not engage in a business regulated by this 36 chapter, or act or assume to act as, or represent himself or herself
- 37 to be, a licensee unless he or she is licensed—under as an
- 38 independent insurance adjuster in accordance with this chapter.
- 39 No

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1 (b) A person shall *not* falsely represent that he or she is 2 employed by a licensee.

SEC. 8. Section 14021 of the Insurance Code is repealed.

14021. An insurance adjuster within the meaning of this chapter is a person other than a private investigator as defined in Section 7521 of the Business and Professions Code who, for any consideration whatsoever, engages in business or accepts employment to furnish, or agrees to make, or makes, any investigation for the purpose of obtaining, information in the course of adjusting or otherwise participating in the disposal of, any claim under or in connection with a policy of insurance on behalf of an insurer or engages in soliciting insurance adjustment business or aids an insurer in any manner with reference to:

Crime or wrongs done or threatened against the United States of America or any state or territory of the United States of America; the identity, habits, conduct, business, occupation, honesty, integrity, credibility, knowledge, trustworthiness, efficiency, loyalty, activity, movement, whereabouts, affiliations, associations, transactions, acts, reputation, or character of any person; the location, disposition, or recovery of lost or stolen property; the cause or responsibility for fires, libels, losses, accidents, or damage or injury to persons or to property; or securing evidence to be used before any court, board, officer, or investigating committee.

Notwithstanding any other provision of law, this section is in no way intended to limit the ability of a duly licensed independent insurance adjuster to perform the duties of an independent insurance adjuster for any other entity.

- SEC. 9. Section 14021 is added to the Insurance Code, to read: 14021. An independent insurance adjuster, for purposes of this chapter, is all of the following:
- (a) An individual, a business entity, an independent contractor, or an employee of a contractor, who contracts for compensation with insurers.
- (b) A person whose tax treatment by the insurers is consistent with that of an independent contractor rather than an employee, as defined in Section 3121 of Title 26 of the United States Code.
- (c) A person who investigates, negotiates, or settles property and casualty claims for insurers.
- 39 SEC. 10. Section 14022 of the Insurance Code is amended to 40 read:

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14022. This chapter does not apply to: to any of the following:

(a) A person employed exclusively and regularly by one employer in connection with the affairs of such employer only and where there exists an employer-employee relationship.

(b)

(a) An officer or employee of the United States of America, or of this state or a political subdivision thereof, while—such that officer or employee is engaged in the performance of his or her official duties.

10 (e)

(b) A person engaged exclusively in the business of obtaining and furnishing information as to the financial rating of persons.

(d)

(c) A charitable philanthropic society or association duly incorporated under the laws of this state, which is organized and maintained for the public good and not for private profit.

(e)

(d) An attorney at law admitted to practice in performing California, when acting in his or her-duties professional capacity as such attorney at law. an attorney.

(f)

- (e) A licensed collection agency or an employee thereof while acting within the scope of his or her employment, while making an investigation incidental to the business of the agency, including an investigation of the location of a debtor or his or her property where the contract with an assignor creditor is for the collection of claims owed or due or asserted to be owed or due or the equivalent thereof.
- (f) An officer, director, manager, or employee of an authorized insurer, surplus line insurer, a risk retention group, or an attorney-in-fact of a reciprocal insurer.
- (g) Admitted insurers and agents and A licensed insurance brokers licensed by the state, performing duties in connection with insurance transacted by them. agent or broker, attorney-in-fact of a reciprocal insurer, or managing general agent of the insurer to whom claim authority has been granted by the insurer.
- (h) The legal owner of personal property—which that has been sold under a conditional sales agreement or a mortgagee under the terms of a chattel mortgage.

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(i) Any bank subject to the jurisdiction of the Commissioner of Financial Institutions of the State of California Business Oversight under Division 1 (commencing with Section 99) of the Financial Code or the Comptroller of the Currency of the United States.

- (j) A person-engaged employed solely in the business of securing information about persons to obtain facts surrounding a claim or property from public records. to furnish technical assistance to a licensed independent insurance adjuster.
- (k) Any building contractor, engineer, technical expert, or other person who is engaged by an insurer or licensed *independent insurance* adjuster to provide an expert or professional evaluation of the extent, cause, or origin of damage to the insured property, but who does not otherwise participate in the process of adjusting claims.
- (l) An individual who is employed to investigate suspected fraudulent insurance claims but who does not adjust losses or determine claims payments.
- (m) A person who solely performs executive, administrative, managerial, or clerical duties or any combination thereof and who does not investigate, negotiate, or settle claims with policyholders, claimants, or their legal representative.
- (n) A licensed health care provider or its employee who provides managed care if the services do not include the determination of compensability.
- (o) A managed care organization or any of its employees who provide managed care services if the services do not include the determination of compensability.
 - (p) A person who settles only reinsurance or subrogation claims.
- (q) A United States manager of the United States branch of an alien insurer.
- 31 (r) A person who investigates, negotiates, or settles life, accident 32 and health, annuity, or disability insurance claims.
 - (s) An individual employee, under a self-insured arrangement, who adjusts claims on behalf of his or her employer.
 - SEC. 11. Section 14022.5 of the Insurance Code is amended to read:
- 14022.5. (a) In the event of an emergency situation as declared by the commissioner, claims arising out of the emergency,
- 39 catastrophe, disaster, or other similar occurrence may be adjusted

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by a nonlicensed *independent insurance* adjuster upon registration with the commissioner if all of the following requirements are met:

- (1) The work performed by the nonlicensed *independent insurance* adjuster is under the active direction, control, charge, or management of a licensed *independent insurance* adjuster or an insurer authorized to do business in this state.
- (2) Registration with the commissioner is accomplished within 15 five working days from the date on which the nonlicensed independent insurance adjuster commences the claims adjusting activity in connection with the emergency situation.
- (b) "Registration," within the meaning of this section,—shall mean means a written letter to the commissioner, submitted by the supervising licensed independent insurance adjuster or admitted insurer, naming the nonlicensed independent insurance adjusters, identifying their independent insurance adjuster licenses held in other jurisdictions, and stating when their claims adjusting activity commenced.
- (c) Registration under this section is valid for a period of 180 90 days from the date of the registration letter. Before the lapse of that period, the commissioner may grant further 180-day 90-day extensions as he or she deems appropriate upon written request from the supervising licensed *independent insurance* adjuster or the admitted insurer.
- SEC. 12. Section 14024 of the Insurance Code is amended to read:
- 14024. (a) An *individual* application shall be verified and shall-include: *include all of the following*:

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(1) The full *legal* name and business address business, resident, and mailing addresses of the applicant.

31 (b)

- (2) The name under which the applicant intends to do business.
- (3) The applicant's birth date and social security number.
- (4) The application fees set forth in Section 14097.

35 (c)

(5) A statement as to the general nature of the business in whichthe applicant intends to engage.

38 (d)

39 (6) A statement as to the classification or classifications under 40 which the applicant desires to be qualified.

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(e) If the applicant is a person other than an individual, the

(7) Two recent photographs of the applicant, of a type prescribed by the commissioner, and one classifiable set of his or her fingerprints, to be sent to a live scan fingerprint provider as directed by the department, if fingerprints are not submitted in person with a live scan fingerprinting service provider certified by the Department of Justice.

- (8) A verified statement of his or her experience qualifications, unless applying for an apprentice independent insurance adjuster license.
- (9) Other information, evidence, statements, or documents as may be required by the commissioner.
- (b) A business entity application shall be verified and shall include all of the following:
- (1) The full legal name and residence address of each of its partners, officers, and directors, and its manager.
- (f) Two recent photographs of the applicant, of a type prescribed by the commissioner, and two classifiable sets of his or her fingerprints.
 - (2) The name under which the applicant intends to do business.
- (3) The name of a licensed independent insurance adjuster who is responsible for the business entities compliance with this chapter.
 - (4) That the applicant paid the fees set forth in Section 14097.
- (5) A statement as to the general nature of the business in which the applicant intends to engage.

(g)

- (6) A verified statement of his or her experience qualifications. as to the classifications under which the applicant desires to be qualified.
 - (h) Such other
- (7) Other information, evidence, statements, or documents as may be required by the commissioner.
- 33 SEC. 13. Section 14025 of the Insurance Code is amended to 34 read:
- 35 14025. Before an application for a license is granted, the applicant, or his or her manager, applicant shall meet all of the following: following requirements:
 - (a) Be at least 18 years of age.

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(b) Not have committed acts or crimes constituting grounds for denial of licensure under Section 480 of the Business Sections 1668 and Professions Code. 1669.

- (c) Shall have had at least two years of experience in adjusting insurance claims or the equivalent thereof as determined by the commissioner. commissioner, unless applying for an apprentice independent insurance adjuster license.
- (d) If the applicant resides in a state that does not license independent insurance adjusters, he or she is required to be licensed in good standing to designate California as his or her home state.
- (e) (1) Completed a 20-hour prelicensing education course of study.
- (2) A nonresident applicant currently licensed as a home state independent insurance adjuster in another state who has met that state's prelicensing education requirements is exempt from completing the prelicensing education requirement.
- (f) Successfully passed the examination for the independent insurance adjuster license, unless he or she qualifies for an exemption in Section 14026.

(d)

- (g) Comply with—such those other qualifications—as that the commissioner may fix require by—rule. regulation.
- SEC. 14. Section 14025.1 is added to the Insurance Code, to read:
- 14025.1. (a) The apprentice independent insurance adjuster license is a license to facilitate the experience, education, and training necessary to ensure reasonable competency in the responsibilities and duties of an independent insurance adjuster.
- (b) An individual applying for an apprentice independent insurance adjuster license shall submit an application in a format prescribed by the commissioner and shall declare under penalty of suspension, revocation, or refusal of the license that the statements made in the application are true, correct, and complete to the best of the individual's knowledge and belief. Before approving the application, the commissioner shall determine that the individual meets all of the following:
 - (1) Is at least 18 years of age.
- 39 (2) Is a resident of California and has designated California as 40 his or her home state.

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(3) Has a business or mailing address in California for the acceptance of service of process.

- (4) Has not committed any act that is a ground for suspension, revocation, or denial of licensure as set forth in Sections 1668, 1668.1, and 1669.
- (5) Is trustworthy, reliable, and of good reputation, evidence of which may be determined by the commissioner.
- (6) Has paid the fees set forth in subdivision (h) of Section 14097.
- (c) The apprentice independent insurance adjuster license shall be subject to the following terms and conditions:
- (1) The applicant shall submit, with the apprentice independent insurance adjuster application, an attestation from a licensed independent insurance adjuster certifying that the apprentice will be subject to training, direction, and control by the licensed independent insurance adjuster and further certifying that the licensed independent insurance adjuster assumes responsibility for the actions of the apprentice in the apprentice's capacity as an independent insurance adjuster.
- (2) The apprentice independent insurance adjuster is only authorized to adjust claims in California.
- (3) The apprentice independent insurance adjuster is restricted to participation in the investigation, settlement, and negotiation of claims subject to the review and final determination of the claim by a supervising licensed independent insurance adjuster.
- (4) Compensation of an apprentice independent insurance adjuster shall only be on a salaried or hourly basis.
- (5) The apprentice independent insurance adjuster shall not be required to take and successfully complete the independent insurance adjuster examination to adjust claims as an apprentice independent insurance adjuster. At any time during the apprenticeship, the apprentice independent insurance adjuster may choose to take the examination. If the individual takes and successfully completes the independent insurance adjuster exam, the apprentice independent insurance adjuster license shall automatically terminate and an independent insurance adjuster license shall be issued to that individual in its place.
- (6) The apprentice independent insurance adjuster license is valid for a period not to exceed 12 months and is nonrenewable.

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(7) The licensee shall be subject to suspension, revocation, or denial pursuant to Sections 1668, 1668.1, and 1669.

- (8) The applicant shall submit two recent photographs of the applicant, of a type prescribed by the commissioner, and one classifiable set of his or her fingerprints, to be sent to a live scan fingerprint provider as directed by the department, if fingerprints are not submitted in person with a live scan fingerprinting service provider certified by the Department of Justice.
 - SEC. 15. Section 14026 of the Insurance Code is repealed.
- 14026. The commissioner may require an applicant, or his or her manager, to demonstrate his or her qualifications by a written or oral examination, or a combination of both.
- SEC. 16. Section 14026 is added to the Insurance Code, to read:
- 14026. (a) An applicant for an independent insurance adjuster license, unless applying for an apprentice independent insurance adjuster license or crop insurance adjuster license, shall pass a written examination.
- (1) The examination shall test the knowledge of the applicant concerning the duties and responsibilities of an independent insurance adjuster and this code.
- (2) An applicant applying for an examination shall remit a nonrefundable fee as prescribed by the commissioner in Section 14097.
- (b) An individual who applies for an independent insurance adjuster license in California who holds a home state license in another state as an independent insurance adjuster shall not be required to complete the examination if he or she successfully passed an examination as a condition of receiving an independent insurance adjuster license in his or her home state. This exemption applies to individuals who are currently licensed in their home state or if the home state license expired and the application is received by the commissioner within 90 days of expiration.
- (c) An individual who applies for an apprentice independent insurance adjuster license pursuant to Section 14025.1, and who adjusts claims in that capacity, shall not be required to take and successfully complete the independent insurance adjuster examination.
 - SEC. 17. Section 14027 of the Insurance Code is repealed.

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14027. Payment of the application fee prescribed by this chapter entitles an applicant, or his or her manager, to one examination without further charge. If the person fails to pass the examination, he or she shall not be eligible for any subsequent examination except upon payment of the reexamination fee prescribed by this chapter for each such subsequent examination.

- SEC. 18. Section 14028 of the Insurance Code is amended to read:
- 14028. After a hearing hearing, the commissioner may deny a license unless the application makes a showing satisfactory to the commissioner that the applicant, if an individual, has not, or if the applicant is a person other than an individual, that its manager and each of its officers and partners have not: not done any of the following:
- (a) Committed any acts or crimes constituting grounds for denial of licensure under Section 480 of the Business and Professions Code.
- 18 (b)

- 19 (a) Been refused a license under this chapter or had a license 20 revoked.
- 21 (e)
 - (b) Been an officer, partner, or manager of any person who has been refused a license under this chapter or whose license has been revoked.
- 25 (d)
 - (c) While unlicensed committed, or aided and abetted the commission of, any act for which a license is required by this chapter.
- 29 (e)
 - (d) Committed any act or crime constituting grounds for denial of license licensure under Section 1668.
- 32 SEC. 19. Section 14029 of the Insurance Code is repealed.
 - 14029. (a) The business of each licensee shall be operated under the active direction, control, charge, or management of the licensee, if the licensee is qualified, or the person who has qualified to act as the licensee's manager, if the licensee is not qualified.
- 37 (b) No person shall act as a manager of a licensee until he or 38 she has complied with each of the following:

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(1) Demonstrated his or her qualifications by a written or oral examination, or a combination of both, if required by the commissioner.

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- (2) Made a satisfactory showing to the commissioner that he or she has the qualifications prescribed by Section 14025 and that none of the facts stated in Section 14028 or 14028.5 exist as to him or her.
- (c) If the manager, who has qualified as provided in this section, ceases for any reason whatsoever to be connected with the licensee to whom the license is issued, the licensee shall notify the commissioner in writing 30 days from the cessation. If notice is given, the license shall remain in force for a reasonable length of time to be determined by the rules of the commissioner pending the qualifications, as provided in this chapter, of another manager. If the licensee fails to notify the commissioner within the 30-day period, his or her license shall be subject to suspension or revocation and may be reinstated only upon the filing of an application for reinstatement, payment of the reinstatement fee, if any is due, and the qualification of a manager as provided herein.
- (d) Every manager shall renew his or her authority by satisfying the requirements of Article 8 (commencing with Section 14090). SEC. 20. Section 14029 is added to the Insurance Code, to read:
- 14029. Each organization licensed under this chapter shall designate an individual also licensed as an independent insurance adjuster to be responsible for the organization's compliance with state law.
 - SEC. 21. Section 14030 of the Insurance Code is repealed.
- 14030. Whenever the individual on the basis of whose qualifications a license under this chapter has been obtained ceases to be connected with the licensee for any reason whatever, the business may be carried on for such temporary period and under such terms and conditions as the commissioner shall provide by regulation.
- SEC. 22. Section 14031 of the Insurance Code is amended to 36 read:
 - 14031. Whenever a A hearing is held under this chapter to determine whether an application for a license should be granted or to determine the qualifications of a licensee's manager, the proceedings shall be conducted in accordance with Chapter 5

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(commencing with Section 11501) of Part 1 of Division 3 of Title
 of the Government Code, and the commissioner shall have all
 of the powers granted therein.

- 4 SEC. 23. Section 14032 of the Insurance Code is amended to 5 read:
 - 14032. The form and content of the license shall be determined by the commissioner in accordance with Section 164 of the Business and Professions Code. commissioner.
 - SEC. 24. Section 14037 of the Insurance Code is repealed.
 - 14037. A licensee shall at all times be legally responsible for the good conduct in the business of each of his or her employees or agents, including his or her manager.
 - SEC. 25. Section 14038 of the Insurance Code is amended to read:
 - 14038. (a) Any licensee or officer, director, partner, or manager director, or partner of a licensee may divulge to any law enforcement officer or district attorney, or to his or her representative, any information he or she may acquire as to any criminal offense, but he or she shall not divulge to any other person, except as he or she may be required by law to do so, any information acquired by him or her except at the direction of the employer or client for whom the information was obtained.
 - (b) No-A licensee or officer, director, partner, manager, or employee director, or partner of a licensee shall not knowingly make any false report to his or her employer or client for whom information was being obtained.
 - (c) No-A written report shall *not* be submitted to a client except by the licensee, qualifying manager, or a person authorized by one or either of them, and such person submitting the report licensee who shall exercise diligence in ascertaining whether or not the facts and information in-such a that report are true and correct.
 - (d) No licensee, A licensee or officer, director, partner, manager, or employee director, or partner of a licensee shall not use a badge in connection with the official activities of the licensee's business.
 - (e) No licensee, A licensee or officer, director, partner, manager, or of a licensee, director, or partner of a licensee shall not use a title, or wear a uniform, or use an insignia, or use an identification card, or make any statement with the intent to give an impression that he or she is connected in any way with the federal government,

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a state government, or any political subdivision of a state government.

- (f) No licensee, A licensee or officer, director, partner, manager, or employee director, or partner of a licensee, shall not enter any private building or portion thereof without the consent of the owner or of the person in legal possession thereof.
- (g) No-A licensee shall *not* appear as an assignee party in any proceeding involving claim and delivery, replevin, or other possessory action, action to foreclose a chattel mortgage, mechanic's lien, materialman's lien, or any other lien.
- (h) No-A licensee shall *not* permit an employee or agent in his or her own name to advertise, engage clients, furnish reports, or present bills to clients, or in any manner whatever to conduct business for which a license is required under this chapter. All business of the licensee shall be conducted in the name of and under the control of the licensee.
- (i) No-A licensee acting as an independent automobile damage appraiser or adjuster or as an automobile insurance claims adjuster, appraiser appraiser, or representative shall not receive any financial benefit from an automobile repair facility. "Financial benefit" means the receiving of any commission or gratuity, discount on repair costs, free repairs, employment by a repair facility, or possession of more than 3 percent direct ownership in an automobile repair facility located in this state.
- SEC. 26. Section 14039 of the Insurance Code is amended to read:
- 14039. No-A person licensed as an *independent* insurance adjuster shall *not* do any of the following:
- (a) Fail to disclose his or her full financial interest in a contract or agreement executed by him or her for the adjustment of a claim prior to the execution thereof.
- (b) Use any misrepresentation to solicit a contract or agreement to adjust a claim.
- (c) Solicit or accept remuneration from, or have a financial interest exceeding 3 percent in, any salvage, repair, or other firm, which firm that obtains business in connection with any claim which that he or she has a contract or agreement to adjust.
- SEC. 27. Section 14040 of the Insurance Code is amended to read:

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14040. Any badge or cap insignia worn by a person who is a licensee, officer, director, partner, manager, or employee director, or partner of a licensee shall be of a design approved by the commissioner, and shall bear on its face a distinctive word indicating the name of the licensee and an employee number by which such person may be identified by the licensee.

SEC. 28. Section 14042 of the Insurance Code is amended to read:

14042. No

- (a) A licensee shall *not* conduct a business under a fictitious or other business name unless and until he or she has obtained the written authorization of the commissioner to do so.
- (b) The commissioner shall not authorize the use of a fictitious or other business name which that is so similar to that of a public officer or agency or of that used by another licensee that the public may be confused or misled thereby.
- (c) The authorization shall require, as a condition precedent to the use of any fictitious name, that the licensee comply with Section 1724.5 of this code and Chapter 5 (commencing with Section 17900) of Part 3 of Division 7 of the Business and Professions Code. 1724.5.
- (d) A licensee desiring to conduct his or her business under more than one fictitious business name shall obtain the authorization of the commissioner in the manner prescribed in this section for the use of each such that name.
- (e) The licensee shall pay a fee of ten dollars (\$10) for each authorization to use an additional fictitious business name and for each change in the use of a fictitious business name. If the original license is issued in a nonfictitious name and authorization is requested to have the license reissued in a fictitious business name, the licensee shall pay a fee of twelve dollars (\$12) for—such that authorization.
- SEC. 29. Section 14061 of the Insurance Code is amended to read:
- 14061. The commissioner may suspend or revoke a license issued under this chapter or may issue a restricted license in accordance with Section 14026.5 if he or she determines that the licensee, or his or her manager, if an individual, or if licensee or if the licensee is a person other than an individual, that any of its

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officers, directors, partners, or its—manager, has: designated responsible person has done any of the following:

- (a) Made any false statement or given any false information in connection with an application for a license or a renewal or reinstatement of a license.
 - (b) Violated any provisions of this chapter.

- (c) Violated any rule of the commissioner adopted pursuant to the authority contained in this chapter.
- (d) Been convicted of any crime substantially related to the qualifications, functions functions, and duties of the holder of the registration or license in question.
- (e) Impersonated, or permitted or aided and abetted an employee to impersonate impersonate, a law enforcement officer or employee of the United States of America, or of any state or political subdivision thereof.
- (f) Committed or permitted any employee to commit any act, while the license was expired—which that would be cause for the suspension or revocation of a license, or grounds for the denial of an application for a license.
- (g) Willfully failed or refused to render to a client services or a report as agreed between the parties and for which compensation has been paid or tendered in accordance with the agreement of the parties.
- (h) Committed assault, battery, or kidnapping, or used force or violence on any person, without proper justification.
- (i) Knowingly-violated, violated or advised, encouraged, or assisted the violation of any court order or injunction in the course of business as a licensee.
 - (j) Acted as a runner or capper for any attorney.
- (k) Committed any act—which that is a ground for denial of an application for license under this chapter.
- (*l*) Purchased, possessed, or transported any tear gas weapon except as authorized by law. A violation of this subdivision may be punished by the suspension of a license for a period to be determined by the commissioner.
- SEC. 30. Section 14063 of the Insurance Code is amended to read:
- 14063. The commissioner may suspend or revoke a license issued under this chapter or may issue a restricted license in accordance with Section 14026.5 if the commissioner determines

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that the licensee, or his or her manager, if an individual, or if the licensee is a person other than an individual, that any of its officers, directors, partners, or its manager, has: designated responsible

4 person has done any of the following:5 (a) Used any letterhead, advertisem

- (a) Used any letterhead, advertisement, or other printed matter, or in any matter whatever represented that he or she is an instrumentality of the federal government, *or of* a state or any political subdivision thereof.
- (b) Used a name different from that under which he or she is currently licensed in any advertisement, solicitation, or contract for business.
- 12 SEC. 31. Section 14064 of the Insurance Code is amended to 13 read:
 - 14064. (a) The commissioner may suspend or revoke a license issued under this chapter or may issue a restricted license in accordance with Section 14026.5 if the commissioner determines that the licensee, or his or her manager, if an individual, or if the licensee is a person other than an individual, that any of its officers, directors, partners, or its manager, designated responsible person has committed any act in the course of the licensee's business constituting dishonesty or fraud.
 - (b) "Dishonesty or fraud" as used in this section includes, in addition to other acts not specifically enumerated herein, all of the following:

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(1) Knowingly making a false statement relating to evidence or information obtained in the course of employment, or knowingly publishing a slander or a libel in the course of business.

(b)

(2) Using illegal means in the collection or attempted collection of a debt or obligation.

32 (c

(3) Manufacture of evidence.

34 (d)

(4) Acceptance of employment adverse to a client or former client relating to a matter with respect to which the licensee has obtained confidential information by reason of or in the course of his or her employment by—such that client or former client.

39 (e)

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(5) Impersonating, or permitting or aiding and abetting an employee to impersonate impersonate, a law enforcement officer or employee of the United States of America, or of any state or political subdivision thereof.

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SEC. 32. Section 14078 of the Insurance Code is repealed.

14078. As used in this article, "nonresident" means a person who is not a resident of this state at the time of the performance of the act referred to in Section 14071.

SEC. 33. Section 14078 is added to the Insurance Code, to read:

- 14078. (a) Unless refused licensure pursuant to Sections 14060 to 14065, inclusive, a nonresident person shall receive a nonresident independent insurance adjuster license if all of the following apply:
- (1) The applicant is currently licensed in good standing as an independent insurance adjuster in his, her, or its resident or home state.
 - (2) The applicant paid the fees required by Section 14097.
- (3) The applicant submitted to the commissioner the completed application for licensure.
- (4) The applicant's home state awards nonresident independent insurance adjuster licenses to residents of California on the same basis.
- (b) The commissioner may verify the independent insurance adjuster's licensing status through any appropriate database, including the Producer Database maintained by the National Association of Insurance Commissioners, its affiliates or subsidiaries, or may request certification of good standing.
- (c) As a condition to the continuation of a nonresident independent insurance adjuster license, the licensee shall maintain a resident independent insurance adjuster license in his, her, or its home state.
- (1) The nonresident independent insurance adjuster license issued under this chapter shall terminate and be surrendered immediately to the commissioner if the resident independent insurance adjuster license terminates for any reason, unless the termination is due to the independent insurance adjuster being issued a new resident independent insurance adjuster license in his, her, or its new home state.

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(2) The nonresident independent insurance adjuster license shall terminate if the person's home state does not award nonresident independent insurance adjuster licenses to residents of California on the same basis.

- (3) (A) The licensee is required to give notice of resident independent insurance adjuster license termination to any state that issued a nonresident independent insurance adjuster license.
- (B) The notice is required to be given within 30 days of the termination date. If the resident independent insurance adjuster license was terminated for change in resident home state, then the notice is required to include both the previous and current address.
- (4) Maintaining a resident independent insurance adjuster license is required for the nonresident independent insurance adjuster license to remain valid.
- SEC. 34. Section 14079 is added to the Insurance Code, to read:
- 14079. (a) An independent insurance adjuster shall be honest and fair in all communications with the insured, the insurer, and the public.
- (b) An independent insurance adjuster shall provide policyholders and claimants with prompt and knowledgeable service and courteous, fair, and objective treatment at all times.
- (c) An independent insurance adjuster shall not give legal advice and shall not deal directly with any policyholder or claimant who is represented by legal counsel without the consent of the legal counsel involved.
- (d) An independent insurance adjuster shall comply with all local, state, and federal privacy and information security laws.
- (e) An independent insurance adjuster shall identify himself or herself as an independent insurance adjuster and, if applicable, shall identify his or her employer when dealing with any policyholder or claimant.
- (f) An independent insurance adjuster shall not have any financial interest in any adjustment or shall not acquire for himself, herself, or any person any interest or title in salvage, without first receiving written authority from the principal.
- 37 SEC. 35. Section 14080 of the Insurance Code is amended to 38 read:
- 39 14080. Any person who knowingly falsifies the fingerprints or photographs submitted under *paragraph* (7) of subdivision—(f)

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1 (a) of Section 14024 or paragraph (8) of subdivision (c) of Section 14025.1 is guilty of a felony. Any person who violates any of the other provisions of this chapter is guilty of a misdemeanor punishable by fine not to exceed five hundred dollars (\$500), or by imprisonment in the county jail not to exceed one year, or by both-such the fine and imprisonment.

SEC. 36. Section 14090.1 of the Insurance Code is amended to read:

- 14090.1. (a) An individual who holds an *independent* insurance adjuster license and who is not exempt under subdivision (b) shall satisfactorily complete a minimum of 24 hours, of which three hours are to be in ethics, of continuing education courses pertinent to the duties and responsibilities of an *independent* insurance adjuster license reported and shall report the completion of this coursework to the insurance commissioner on a biennial basis in conjunction with his or her license renewal cycle.
 - (b) This section does not apply to any of the following:
- (1) A licensee not licensed for one full year prior to the end of the applicable continuing education biennium.
- (2) A licensee holding a nonresident *independent* insurance adjuster license who has met the continuing education requirements of his or her designated-resident *home* state.
- (3) An individual licensed as an *independent* insurance adjuster and as a property or casualty broker-agent, pursuant to Section 1625, who has met the continuing education requirements specified in Section 1749.3.
- (4) An individual licensed as an apprentice independent insurance adjuster pursuant to Section 14025.1.
- SEC. 37. Section 14097 of the Insurance Code is amended to read:
- 14097. The amount of fees prescribed by this chapter, unless otherwise fixed, is that fixed in the following schedule:
- (a) The application fee for *the qualifying examination for* an original license is twenty-nine dollars (\$29).
- (b) The application fee for an original branch office certificate is eighteen dollars (\$18).
- (c) The fee for an original license *application* is an amount equal to the renewal fee in effect on the last regular renewal date before the date on which the license is issued, except that, if the license will expire less than one year after its issuance, then the fee is an

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1 amount equal to 50 percent of the renewal fee in effect on the last

- 2 regular renewal date before the date on which the license is issued.
- 3 The commissioner may, by appropriate regulation, provide for the
- waiver or refund of the initial license fee where the license is issued
 less than 45 days before the date on which it will expire.
- 6 (d) The renewal fee shall be fixed by the commissioner as
 - follows:
 (1) For a license as an *independent* insurance adjuster, not more than one hundred eighteen dollars (\$118).
 - (2) For a branch office certificate, not more than twenty-four dollars (\$24).
 - (e) The application and license fee for classifications prescribed by the commissioner, in addition to those provided for in this chapter, and the application and license fees for a change in the type of business organization of a licensee, shall be in the amount prescribed by rule and regulation of the commissioner.
 - (f) The delinquency fee shall be 50 percent of the renewal fee in effect on the date of expiration, but not more than twenty-nine dollars (\$29). expiration.
 - (g) The fee for reexamination of an applicant or his manager is twelve dollars (\$12).
 - (h) The application fee for an apprentice independent insurance adjuster license shall be fixed by the commissioner by regulation and shall be reasonably related to the actual cost to the department in performing its duties under this chapter.
 - SEC. 38. Section 14099 of the Insurance Code is amended to read:
 - 14099. Application or license—fee fees shall not be refunded Section 158 of the Business and Professions Code. pursuant to Section 1751.5.
 - SEC. 39. No reimbursement is required by this act pursuant to Section 6 of Article XIIIB of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of
- 37 the Government Code, or changes the definition of a crime within
- 38 the meaning of Section 6 of Article XIIIB of the California
- 39 Constitution.

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SECTION 1. Section 103875 of the Health and Safety Code is amended to read:

103875. (a) The department shall conduct a program of epidemiological assessments of the incidence of cancer. The program shall encompass all areas of the state for which cancer incidence data are available. The program shall include the monitoring of cancers associated with suspected carcinogens encountered by the general public both in occupational locations and in the environment generally.

- (b) The program shall be under the direction of the State Public Health Officer, who may enter into contracts as are necessary for the conduct of the program and may accept, on behalf of the state, grants of public or private funds for the program. The department shall analyze available incidence data and prepare reports and perform studies as necessary to identify cancer hazards to the public health and their remedies.
- (c) The department shall analyze data collected pursuant to the program to assess, measure, and publicly report on the quality of cancer care in the state. In assessing and measuring the quality of cancer care in the state, the department shall define and identify oncology providers. In publicly reporting on the quality of cancer care in the state, the department shall identify oncology providers, but not individual cancer patients. The department may contract with an entity to assess, measure, and publicly report on the quality of cancer care in the state.
- (d) The department shall develop a system for routine, automated linkages between data collected pursuant to the program and public and private health insurance payer cancer claims data. The State Public Health Officer shall convene a cancer care stakeholder committee, including public and private payer representatives and persons with appropriate technical experience, to study and make recommendations for developing the automated linkage system. The State Public Health Officer may contract with entities or persons to provide the committee with appropriate technical expertise.
- (e) It is the intent of the Legislature that an appropriation be included in each Budget Act in an amount sufficient to provide for the annual cost of the program. It is further the intent of the Legislature that the cancer care quality measures be available for the public to use to improve health care and population health as

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 it relates to the prevention and treatment of cancer, including the cancer patients themselves.

SEC. 2. Section 103885 of the Health and Safety Code is amended to read:

103885. (a) The department shall establish a statewide system for the collection of information determining the incidence of eancer, using population-based cancer registries modeled after the Cancer Surveillance Program of Orange County. The department shall also identify and include in the statewide system, cancer care quality measures for use in public reporting. As of the effective date of this section the department shall begin phasing in the statewide cancer reporting system. By July 1, 1988, all county or regional registries shall be implemented or initiated. By July 1, 1990, the statewide cancer reporting system shall be fully operational. Within 60 days of the effective date of this section, the State Public Health Officer shall submit an implementation and funding schedule to the Legislature.

(b) The department may designate any demographic parts of the state as regional cancer incidence reporting areas and may establish regional cancer registries, with the responsibility and authority to carry out the intent of this section in designated areas. Designated regional registries shall provide, on a timely basis, cancer incidence data, as required by the department. The department may establish a competitive process to receive applications for, and issue, the award of a contract, grant, or allocation of funds, including, but not limited to, a cooperative agreement, subvention agreement, or any other agreement allowed by law, to an agency, including, but not limited to, a health systems agency, single county health department, multicounty health department grouping, or nonprofit professional association to operate the statewide cancer reporting system and to enter into contracts, or issue grants or funding allocations to other agencies representing a designated cancer reporting region for the purposes of collecting and collating cancer incidence data. The award of these contracts, grants, or funding allocations shall be exempt from Part 2 (commencing with Section 10100) of Division 2 of the Public Contract Code. The department shall include appropriate terms and conditions in a contract, grant, or funding allocation to ensure the proper use of state funds, including provision for reimbursement of allowable costs, financial reporting, program

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performance reporting, monitoring of subgrants, subcontracts, or suballocations to an agency representing a designated cancer reporting region, retention and access requirements for records, data use and management, independent auditing, termination, and disposition of assets acquired under the contract, grant, or funding allocation.

- (c) The State Public Health Officer shall designate cancer as a disease required to be reported in the state or any demographic parts of the state in which cancer information is collected under this section. All cancers diagnosed or treated in the reporting area shall thereafter be reported to the representative of the department authorized to compile the cancer data, or any individual, agency, or organization designated to cooperate with that representative.
- (d) (1) A hospital or other facility providing therapy to cancer patients within an area designated as a cancer reporting area shall report each case of cancer to the department or the authorized representative of the department in a format prescribed by the department. If the hospital or other facility fails to report in a format prescribed by the department, the department's authorized representative may access the information from the hospital or the facility and report it in the appropriate format. In these cases, the hospital or other health facility shall reimburse the department or the authorized representative for its cost to access and report the information.
- (2) A physician and surgeon, dentist, podiatrist, or other health care practitioner diagnosing or providing treatment for cancer patients shall report each cancer case to the department or the authorized representative of the department except for those cases directly referred to a treatment facility or those previously admitted to a treatment facility for diagnosis or treatment of that instance of cancer.
- (e) A hospital or other facility that is required to reimburse the department or its authorized representative for the cost to access and report the information pursuant to subdivision (d) shall provide payment to the department or its authorized representative within 60 days of the date this payment is demanded. In the event a hospital or other facility fails to make the payment to the department or its authorized representative within 60 days of the date the payment is demanded, the department or its authorized representative may, at its discretion, assess a late fee not to exceed

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1½ percent per month of the outstanding balance. Further, in the 2 event that the department or its authorized representative takes a 3 legal action to recover its costs and any associated fees, and the 4 department or its authorized representative receives a judgment in 5 its favor, the hospital or other facility shall also reimburse the 6 department or its authorized representative for any additional costs it incurred to pursue the legal action. Late fees and payments made to the department by hospitals or other facilities pursuant to this subdivision shall be considered as reimbursements of the additional 10 costs incurred by the department.

- (f) All physicians and surgeons, hospitals, outpatient clinics, nursing homes and all other facilities, individuals, or agencies providing diagnostic or treatment services to patients with cancer shall grant to the department or the authorized representative access to all records that would identify cases of cancer or would establish characteristics of the cancer, treatment of the cancer, or medical status of any identified cancer patient. Willful failure to grant access to those records shall be punishable by a fine of up to five hundred dollars (\$500) each day access is refused. Fines collected pursuant to this subdivision shall be deposited in the General Fund.
- (g) (1) Except as otherwise provided in this section, all information collected pursuant to this section shall be confidential. For purposes of this section, this information shall be referred to as "confidential information."
- (2) The department and any regional cancer registry designated by the department shall use the information to determine the sources of malignant neoplasms and evaluate measures designed to eliminate, alleviate, or ameliorate their effect, and assess and publicly report on the quality of cancer care in the state.
- (3) The following persons who meet qualifications determined by the department and who agree, in writing, to maintain confidentiality, may be authorized access to confidential information:
- (A) A person with a valid scientific background who is engaged in demographic, epidemiologic, quality of care assessment or improvement, or other similar studies related to health.
- (B) A person engaged in the dissemination of data to the public as it relates to the prevention and treatment of cancer.

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(C) A person engaged in improving health care and population health as it relates to the treatment and prevention of cancer, including cancer patients themselves.

- (4) The department and any regional cancer registry designated by the department may enter into agreements to furnish confidential information to other states' cancer registries, federal cancer control agencies, local health officers, or health researchers for the purposes of determining the sources of cancer and evaluating measures designed to eliminate, alleviate, or ameliorate their effect, and assessing and publicly reporting on the quality of cancer care in the state. Before confidential information is disclosed to those agencies, officers, researchers, or out-of-state registries, the requesting entity shall agree in writing to maintain the confidentiality of the information, and in the case of researchers, shall also do both of the following:
- (A) Obtain approval of their committee for the protection of human subjects established in accordance with Part 46 (commencing with Section 46.101) of Title 45 of the Code of Federal Regulations.
- (B) Provide documentation to the department that demonstrates to the department's satisfaction that the entity has established the procedures and ability to maintain the confidentiality of the information.
- (5) Notwithstanding any other law, disclosure authorized by this section shall include only the information necessary for the stated purpose of the requested disclosure, used for the approved purpose, and not be further disclosed.
- (6) The furnishing of confidential information to the department or its authorized representative in accordance with this section shall not expose any person, agency, or entity furnishing information to liability, and shall not be considered a waiver of any privilege or a violation of a confidential relationship.
- (7) The department shall maintain an accurate record of all persons who are given access to confidential information. The record shall include: the name of the person authorizing access; name, title, address, and organizational affiliation of persons given access; dates of access; and the specific purpose for which information is to be used. The record of access shall be open to public inspection during normal operating hours of the department.

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(8) Notwithstanding any other law, no part of the confidential information shall be available for subpoena, nor shall it be disclosed, discoverable, or compelled to be produced in a civil, eriminal, administrative, or other proceeding, nor shall this information be deemed admissible as evidence in a civil, eriminal, administrative, or other tribunal or court for any reason.

- (9) Nothing in this subdivision shall prohibit the publication by the department of reports and statistical compilations that do not in any way identify individual cases or individual sources of information.
- (10) Notwithstanding the restrictions in this subdivision, the individual to whom the information pertains shall have access to his or her own information in accordance with Chapter 1 (commencing with Section 1798) of Title 1.8 of the Civil Code.
- (h) For the purpose of this section, "cancer" means either of the following:
- (1) All malignant neoplasms, regardless of the tissue of origin, including malignant lymphoma, Hodgkins disease, and leukemia, but excluding basal cell and squamous cell carcinoma of the skin.
- (2) All primary intracranial and central nervous system (CNS) tumors occurring in the following sites, irrespective of histologic type: brain, meninges, spinal cord, caudae equina, cranial nerves and other parts of the CNS, pituitary gland, pineal gland, and eraniopharyngeal duct.
- (i) Nothing in this section shall preempt the authority of facilities or individuals providing diagnostic or treatment services to patients with cancer to maintain their own facility-based cancer registries.
- (j) It is the intent of the Legislature that the department, in establishing a system pursuant to this section, maximize the use of available federal funds.